

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND				
1 Date of Request: <u>8-4-00</u>		2 Serial/Patent # <u>09/545659</u>		
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
<input checked="" type="checkbox"/>	Filing	1	4-10-00	\$ 385.
<input type="checkbox"/>	Amendment			\$
<input type="checkbox"/>	Extension of Time			\$
<input type="checkbox"/>	Notice of Appeal/Appeal			\$
<input type="checkbox"/>	Petition			\$
<input type="checkbox"/>	Issue			\$
<input type="checkbox"/>	Cert of Correction/Terminal Disc.			\$
<input type="checkbox"/>	Maintenance			\$
<input type="checkbox"/>	Assignment			\$
<input type="checkbox"/>	Other			\$
<div style="border: 1px solid black; padding: 5px; min-height: 40px;"> <i>Check yellow fee sheet</i> </div>			7 TOTAL AMOUNT OF REFUND \$ 385.	
10 REASON:		8 TO BE REFUNDED BY:		
<input checked="" type="checkbox"/> Overpayment <input type="checkbox"/> Duplicate Payment <input type="checkbox"/> No Fee Due (Explanation):		Treasury Check Credit Deposit A/C #: 9 0 3 -- 1 9 5 2		
11 REFUND REQUESTED BY:				
TYPED/PRINTED NAME: <u>Janice Britton</u>		TITLE: <u>Legal Examiner</u>		
SIGNATURE: <u>Janice Britton</u>		PHONE: <u>308-9491</u>		
OFFICE: <u>T3-01PE</u>				
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****				
APPROVED: _____ DATE: _____				

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: